AO 240 (Rev. 10/03) DELAWARE (Rev. 4/05)

UNITED STATES DISTRICT COURT

		DISTRICT OF D	ELAWARE		
		Optiz Carlos Sr			
	1	Plaintiff	APPLICATION	TO PROCEED	
	ļ	in Vacanta	WITHOUT PREI	PAYMENT OF	
	Abor	MAS (ARRA) (MARATA)	FEES AND A	FFIDAVIT	
	11107	Defendant(s)			
			CASE NUMBER: (7 - 29	
	Chelo	as Natiz Sa	declare that I am the (ch		
• •	Petiti	ioner Plaintiff Movant • Other		,	
28 US sough	SC §191 at in the	entitled proceeding; that in support of my request 15, I declare that I am unable to pay the costs of complaint/petition/motion. This application, I answer the following question you currently incarcerated?	f these proceedings and tha	at I am entitled to the relief	
	If "V		\sim 1 \sim	\ ૂ છ ું	
	11 1	ES" state the place of your incarceration	ALE CORRECTIONALE	MER CO THE	
		TES" state the place of your incarceration 1 No 1 No.	#M485118	where we may	
	Inma		00.1091160	WEE CONTRACTOR	
	Inma	ate Identification Number (Required):	eceive any payment from th	te institution?	
	Inma	ate Identification Number (Required):	eceive any payment from th	te institution?	
2.	Are y Attac	you employed at the institution? No you reach a ledger sheet from the institution of your inconstitutions	eceive any payment from th	te institution?	
2.	Are y Attac	you employed at the institution? No you reach a ledger sheet from the institution of your inconstitutions	ceive any payment from the arceration showing at least to the local transfer of the loca	the past six months'	
2.	Are y Are y Are y	you employed at the institution? No you reach a ledger sheet from the institution of your inconstitutions you currently employed? Yes	ceive any payment from the arceration showing at least to the look of the look	the past six months' ges and pay period a t of your take-home	
2.	Are y Attan Are y a. b.	you employed at the institution? No Do you reach a ledger sheet from the institution of your inconstantions you currently employed? Yes If the answer is "YES" state the amount of your and give the name and address of your employed. If the answer is "NO" state the date of your later the answer is "NO" state the date of your later the date o	ceive any payment from the arceration showing at least loo ur take-home salary or wag eyer. st employment, the amount and address of your last em	the past six months' ges and pay period a t of your take-home aployer. WA	
2.	Are y Attan Are y a. b.	you employed at the institution? No Do you reach a ledger sheet from the institution of your inconstactions you currently employed? Yes If the answer is "YES" state the amount of your and give the name and address of your employed and give the name and address of your employed.	ceive any payment from the arceration showing at least loose to take-home salary or wag eyer. St employment, the amount and address of your last employer from any of the follows.	the past six months' ges and pay period a t of your take-home aployer. WA	
2.	Are y a. In the	you employed at the institution? No you received at the institution? No you received at the institution? No you received at the institution of your inconstant of your currently employed? Yes Yes If the answer is "YES" state the amount of your and give the name and address of your employed if the answer is "NO" state the date of your last salary or wages and pay period and the name e past 12 twelve months have you received any must business, profession or other self-employment Rent payments, interest or dividends	ceive any payment from the arceration showing at least to the local state of the local st	the past six months' ges and pay period a t of your take-home aployer. WA	
2.	Are y Are y a. b. In the	you employed at the institution? No Do you reach a ledger sheet from the institution of your inconstactions you currently employed? Yes If the answer is "YES" state the amount of your and give the name and address of your employed and give the name and address of your employed. If the answer is "NO" state the date of your last salary or wages and pay period and the name expected any management payments, interest or dividends Pensions, annuities or life insurance payments.	ceive any payment from the arceration showing at least loo ur take-home salary or wag eyer. st employment, the amount and address of your last employer from any of the following the eyes eyes eyes eyes	the past six months' the past six months' tes and pay period a t of your take-home aployer. WA wing sources?	
2.	Are y Atta trans Are y a. b. In the a. b.	you employed at the institution? No you received at the institution? No you received a ledger sheet from the institution of your inconstactions you currently employed? Yes If the answer is "YES" state the amount of your and give the name and address of your employed and give the name and address of your employed. If the answer is "NO" state the date of your last salary or wages and pay period and the name e past 12 twelve months have you received any managements, interest or dividends Pensions, annuities or life insurance payments. Disability or workers compensation payments.	ceive any payment from the arceration showing at least loo ur take-home salary or wag eyer. st employment, the amount and address of your last employer from any of the following the eyes eyes eyes eyes	the past six months' the past six months' tes and pay period a t of your take-home hiployer. WA wing sources?	
2.	Are y Are y a. b. In the	you employed at the institution? No Do you reach a ledger sheet from the institution of your inconstactions you currently employed? Yes If the answer is "YES" state the amount of your and give the name and address of your employed and give the name and address of your employed. If the answer is "NO" state the date of your last salary or wages and pay period and the name expected any management payments, interest or dividends Pensions, annuities or life insurance payments.	ceive any payment from the arceration showing at least loo ur take-home salary or wag eyer. st employment, the amount and address of your last employer from any of the following the eyes eyes eyes eyes	the past six months' the past six months' tes and pay period a t of your take-home aployer. WA wing sources?	

received AND what you expect you will continue to receive.

DELAMA	E (Rev. 4705)
4.	Do you have any cash or checking or savings accounts? •• Yes
5.	If "Yes" state the total amount \$
	valuable property? •• Yes
	If "Yes" describe the property and state its value.

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support, OR state NONE if applicable.

I declare under penalty of perjury that the above information is true and correct.

DATE * Carlos Onto

NOTE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of exch account.

07-29

DELAWARE CORRECTIONAL CENTER SUPPORT SERVICES OFFICE <u>MEMORANDUM</u>

TO:	Carlos C	Ortiz	_SBI#:	18504	8	
FROM:	Stacy Shane, Suppo	ort Services S	ecretary			
RE:	6 Months Account	t Statement				
DATE:	January	8,2007				
Attached are	e copies of your inm	nate account s DLCUM			hs of	
The followin	ng indicates the aver	rage daily bai	lances.			- 29
<u>MO</u> 2	NTH	<u>AVERAGE I</u>	DAILY BA	<u>ALANCE</u>		SCANN C
Qu	<u>ly</u>	5	6.Ce1			Tipota.
<u>a</u>	<u>u '</u>		U.84 7227		ω	
0	1		45.83			
<u> </u>	<u>)</u>		<u>43.23</u> 74.20			
Avera	age daily balances/6	6 months:	50.1	8		

Attachments

CC: File

Individual Statement

Page 1 of 1

Date Printed: 1/8/2007

For Month of July 2006

				\$42.25	Ending Mth Balance:	Ending N			
			296531	\$42.25	\$0.00	\$0.00	(\$72.95)	7/25/2006	Canteen
			292807	\$115.20	\$0.00	\$0.00	(\$74.97)	7/18/2006	Canteen
J. VALLATTS		450118787	292294	\$190.17	\$0.00	\$0.00	\$100.00	7/17/2006	Mail
C. FLORES		08498213678	291237	\$90.17	\$0.00	\$0.00	\$40.00	7/13/2006	Mail
J. VILLATTA		450118090	290193	\$50.17	\$0.00	\$0.00	\$50.00	7/11/2006	Mail
SourceName	PayTo	Ck#	Trans#	Balance	Hold	Medical Hold	Amount	Date	Trans Type
		***			Non-Medical	Non	Deposit or		
						Comments:		т	Current Location:
						Carlos	C	Ortiz	00485068
		\$0.17	ince:	Beg Mth Balance:	Suffix	First Name MI	E :	Last Name	SBI

Total Amount Currently on Non-Medical Hold: \$0.00 Total Amount Currently on Medical Hold: \$0.00

Mail Canteen Canteen

Trans Type

Date

Balance

PayTo

SourceName

\$1.20

\$0.00

302459 299410 Trans#

8/1/2006

(\$41.05) (\$1.20) \$50.00

\$0.00

\$0.00 \$0.00

Canteen

8/22/2006 8/18/2006 8/8/2006

(\$49.65)

\$0.00 \$0.00

\$0.00

\$50.00

0450123252

J VILLALTA

308986 308590

Ending Mth Balance:

\$0.35\$0.35

Individual Statement

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Date Printed: 1/8/2007

For Month of August 2006

			•	VI 111	TOT TITOTION OF TAMBUSE BOOK	0 200	000		
SBI	Last Name	First Name	MI	MI Suffix	Beg Mth Balance:	e:	\$42.25		
00485068	Ortiz	Carlos							
Current Location:	ion:	Сол	Comments:						
Trans Tune	Data	Deposit or Withdrawal Amount Medical Hol	Non-Medical Hold	edical Id		Franc #	MO#or	РасТо	CourceName
Trans Type	Date	Amount Medical Hold		ì	Balance 7	Trans#	Ck#	PayT ₀	SourceName

Total Amount Currently on Non-Medical Hold: \$0.00 Total Amount Currently on Medical Hold: \$0.00

Date Printed: 1/8/2007

For Month of September 2006

Individual Statement

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			_		
SBI Last Name	First Name	MI Suffix	Beg Mth Balance:	\$0.35	
00485068 Ortiz	Carlos				
Current Location: E	Cı	Comments:		Ī	
I .	Deposit or	Non-Medical			

Date 9/1/2006 9/1/2006 9/1/2006 9/6/2006 9/6/2006 9/6/2006 9/8/2006 9/8/2006 9/8/2006 9/8/2006 9/12/2006 9/12/2006 9/13/2006 9/18/2006 9/18/2006					\$41.80	Ending Mth Balance:	End			
Mo				324272	\$41.80	\$0.00	\$0.00	(\$58.95)	9/26/2006	Canteen
Pate Withdraya Won-Medical Hold H				321196	\$100.75	\$0.00	\$0.00	(\$15.83)	9/19/2006	Canteen
Date Amount Medical Hold Non-Medical Hold Balance Trans # Ck # PayTo 9/1/2006 \$100.00 \$0.00 \$0.00 \$100.35 313898 0450124644 J.V 9/1/2006 \$0.00 \$0.00 \$0.00 \$100.35 31430 0450124644 J.V 9/1/2006 \$0.00 \$0.00 \$0.00 \$100.35 314130 0450124644 J.V 9/1/2006 \$0.00 \$0.00 \$0.00 \$96.35 314221 8/26/06 8/26/06 9/6/2006 \$0.00 \$0.00 \$1.59) \$96.35 315443 8/23/06 8/23/06 9/6/2006 \$0.00 \$0.00 \$1.59) \$96.35 315443 8/23/06 8/23/06 9/6/2006 \$0.00 \$0.00 \$1.59) \$96.35 315445 8/23/06 8/23/06 9/8/2006 \$1.59) \$0.00 \$0.00 \$90.35 315445 8/23/06 8/23/06 8/23/06 9/8/2006 \$1.59) \$0.00	C. FLORES		0450127097	321042	\$116.58	\$0.00	\$0.00	\$100.00	9/18/2006	Mail
Part Withdrawal Medical Hold Moment Mo				318817	\$16.58	\$0.00	\$0.00	(\$75.00)	9/12/2006	Canteen
Date Withdrawal Medical Hold Mo Mo Mo Mo Mo FayTo Mo Mo Mo Mo Mo Mo Mo		8/23/06		317561	\$91.58	\$0.00	\$0.00	(\$1.59)	9/8/2006	Supplies-MailP
Date Withdrawal Mon-Medical Hold Non-Medical Balance Trans # Ck # PayTo 9/1/2006 \$100.00 \$0.00 \$0.00 \$100.35 313898 0450124644 J.V 9/1/2006 \$0.00 \$0.00 \$100.35 314130 450124644 J.V 9/1/2006 \$0.00 \$0.00 \$0.00 \$100.35 314130 450124644 J.V 9/1/2006 \$0.00 </td <td></td> <td>8/23/06</td> <td></td> <td>317562</td> <td>\$93.17</td> <td>\$0.00</td> <td>\$0.00</td> <td>(\$1.59)</td> <td>9/8/2006</td> <td>Supplies-MailP</td>		8/23/06		317562	\$93.17	\$0.00	\$0.00	(\$1.59)	9/8/2006	Supplies-MailP
Date Withdrawal Non-Medical Hold Balance Trans # Ck # PayTo 9/1/2006 \$100.00 \$0.00 \$0.00 \$100.35 313898 0450124644 J. V 9/1/2006 \$0.00 \$0.00 \$100.35 314130 8/26/06 9/1/2006 \$0.00 \$0.00 \$100.35 314221 8/26/06 9/6/2006 \$0.00 \$0.00 \$96.35 315443 8/23/06 9/6/2006 \$0.00 \$0.00 \$1.59 \$96.35 315445 8/23/06		8/23/06		317563	\$94.76	\$0.00	\$0.00	(\$1.59)	9/8/2006	Supplies-MailP
Date Amount Medical Hold Non-Medical Balance Trans # Ck # PayTo 9/1/2006 \$100.00 \$0.00 \$0.00 \$100.35 313898 0450124644 J. V 9/1/2006 \$0.00 \$0.00 \$100.35 314130 8/26/06 9/26/06 9/6/2006 \$0.00 \$0.00 \$96.35 314221 8/26/06 9/6/2006 \$0.00 \$0.00 \$96.35 315443 8/23/06 9/6/2006 \$0.00 \$0.00 \$96.35 315444 8/23/06		8/23/06		315445	\$96.35	(\$1.59)	\$0.00	\$0.00	9/6/2006	Supplies-MailP
Non-Medical		8/23/06		315444	\$96.35	(\$1.59)	\$0.00	\$0.00	9/6/2006	Supplies-MailP
Non-Medical Non-Medical MO # or Mo # o		8/23/06		315443	\$96.35	(\$1.59)	\$0.00	\$0.00	9/6/2006	Supplies-MailP
Withdrawal Withdrawal Hold Balance Trans# Ck# PayTo 9/1/2006 \$100.00 \$0.00 \$0.00 \$100.35 313898 0450124644 J. V ical 9/1/2006 \$0.00 (\$4.00) \$0.00 \$100.35 314130 8/26/06		8/26/06		314221	\$96.35	\$0.00	\$0.00	(\$4.00)	9/1/2006	Medical
Withdrawal Hold Hold Balance Trans # Ck # PayTo 9/1/2006 \$100.00 \$0.00 \$0.00 \$100.35 313898 0450124644 J. V		8/26/06		314130	\$100.35	\$0.00	(\$4.00)	\$0.00	9/1/2006	Medical
Withdrawal Non-Medical MO# or Moment Medical Hold Balance Trans# Ck# PayTo	J. VILLATTE		0450124644	313898	\$100.35	\$0.00	\$0.00	\$100.00	9/1/2006	Mail
Non-Medical MO	SourceName	PayTo	Ck#	Trans #	Balance		Medical Hold	Amonnt	Date	Trans Type
			MO#or			Non-Medical		Withdrawal		

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Non-Medical Hold: \$0.00

Trans Type

Date

Medical Hold

Balance

Trans#

MO#or Ck#

PayTo

SourceName

Deposit or Withdrawal Amount

> Non-Medical Hold

Individual Statement

Date Printed: 1/8/2007

For Month of October 2006

				TATE	TOT MICHAEL OF OCCUPANT MOOO	1 2000	
IES	Last Name	First Name	М	MI Suffix	Beg Mth Balance:	\$41.80	
00485068 Ortiz	Ortiz	Carlos					
Current Location:	tion: E	Comments:	ients:				

			\$100.44	Ending Mth Balance:	Ending			
J. VILLATA	0450131433	336623	\$100.44	\$0.00	\$0.00	\$100.00	10/23/2006	Mail
		332914	\$0.44	\$0.00	\$0.00	(\$70.32)	10/17/2006	Canteen
J. VILLATA	0450130353	331067	\$70.76	\$0.00	\$0.00	\$70.00	10/11/2006	Mail
		32/696	\$0.76	\$0.00	\$0.00	(\$41.04)	10/3/2006	Canteen

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Non-Medical Hold: \$0.00

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Individual Statement

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Date Printed: 1/8/2007

For Month of November 2006

		140	or Mon	FOR MOUTH OF MOVEMber 2006	er 2006	
SBI Last Name	First Name	IM	MI Suffix	Beg Mth Balance:	\$100.44	
00485068 Ortiz	Carlos					
Current Location:	Сошл	Comments:				

		Withdrawal	Z	Non-Medical			MO#or		
Trans Type	Date	Amount	Medical Hold	11010	Balance	Trans#	Ck#	PayTo	SourceName
Canteen	11/1/2006	(\$74.37)	\$0.00	\$0.00	\$26.07	340001			
Canteen	11/8/2006	(\$25.80)	\$0.00	\$0.00	\$0.27	343424			
Mail	11/8/2006	\$100.00	\$0.00	\$0.00	\$100.27	343925	0450133365		J. VILLATA
Canteen	11/14/2006	(\$58.77)	\$0.00	\$0.00	\$41.50	345670			
Canteen	11/21/2006	(\$39.28)	\$0.00	\$0.00	\$2.22	348461			
Mail	11/27/2006	\$50.00	\$0.00	\$0.00	\$52.22	350396	0450135973		J VILLALTA
			Endin	Ending Mth Balance:	\$52.22				

Filed 01/16/2007

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Non-Medical Hold: \$0.00

Individual Statement

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Date Printed: 1/8/2007

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				\$55.78	Ending Mth Balance:	Ending M			
			363591	\$55.78	\$0.00	\$0.00	(\$71.52)	12/26/2006	Canteen
J VILLATTE		0450139378	361264	\$127.30	\$0.00	\$0.00	\$100.00	12/20/2006	Mail
			360414	\$27.30	\$0.00	\$0.00	(\$72.71)	12/18/2006	Canteen
J VILLALTA		0450138064	356122	\$100.01	\$0.00	\$0.00	\$100.00	12/8/2006	Mail
			353927	\$0.01	\$0.00	\$0.00	(\$52.21)	12/5/2006	Canteen
SonrceName	PayTo	Ck#	Trans #	Balance	1010	Medical Hold	Amount	Date	Trans Type
		MO#or			Non-Medical	Non-	Deposit or Withdrawal		
						Comments:)n: E	Current Location:
						Carlos	Ca	Ortiz	00485068
		\$52.22	ince:	Beg Mth Balance:	Suffix	First Name MI	Fi	Last Name	SBI

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Non-Medical Hold: \$0.00